

Application or Docket Number

Substitute for Form PTO-875

Application or Docket Number
10/69449

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a), (b), or (c))		
SEARCH FEE (37 CFR 1.16(k), (l), or (m))		
EXAMINATION FEE (37 CFR 1.16(o), (p), or (q))		
TOTAL CLAIMS (37 CFR 1.16(i))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(h))	minus 3 =	*
APPLICATION SIZE FEE (37 CFR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))		
* If the difference in column 1 is less than zero, enter "0" in column 2.		

SMALL ENTITY

RATE (\$)	FEE (\$)
X	=
X	=

OR

RATE (\$)	FEE (\$)
X	=
X	=

TOTAL

TOTAL

* If the difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED - PART II

9:20:07

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA				SMALL ENTITY			SMALL ENTITY	
	Total (37 CFR 1.16(i))	19	Minus	20	=	0		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Independent (37 CFR 1.16(h))	3	Minus	3	=	0	x 25 =			OR	x 50 =	
	Application Size Fee (37 CFR 1.16(s))							x 100 =		OR	x 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
						TOTAL ADD'L FEE				OR	TOTAL ADD'L FEE	

AMENDMENT B

(Column 1)

(Column 2)

(Column 3)

RATE (\$)

ADDL

RATE (S)

ADDI

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA							
	Total (37 CFR 1.16(i))	*	Minus	**	=							
	Independent (37 CFR 1.16(h))	*	Minus	***	=							
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM: (37 CFR 1.16(j))											
						TOTAL ADDITIONAL FEE						

* If the entry in column 1 is less than the entry in column 1 + 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS STATE is less than 20 enter 20

... the largest number less than 50 and ... is less than 5 and ...

The Highest Number Previously Paid For (Total of 1st incident) is the highest number found in the appropriate box in column 1.

This collection of information is required by 35 U.S.C. 116. The information is required to obtain or retain a benefit by the public which is in the public interest, the USPTO is processing an application. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 C.F.R. 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OF COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-270-9199 and select option 2.